FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

142	1001
OMBA	PPROVAL
OMB Number	
Expires:	April 30, 2008
Estimated ave	rage burden oonse16.00
nours per resp	Jonse 10.00
SEC (JSE ONLY
Prefix	Serial

DATE RECEIVED

N	1	12 0 . 1
Name of Offering (☐ check if this is an am Sale of Non-Managing Membership I	_	d indicate change.)
Filing Under (Check box(es) that apply):	□ Rule 504 □ Rule 505	⊠ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing	☐ Amendment	□ Section 4(0) □ Obob
Type of Fining.	A. BASIC IDENTIFICATION	I DATA
1. Enter the information requested about t		<u> </u>
Name of Issuer (check if this is an amend	`````````````````````````````````````	dicate change.)
Baseline 2008 Seed Fund, LLC	_	07085323
Address of Executive Offices	(Number and Street, City State, Zij	p Code) Telephone
1557 Francisco St. San Francisco, CA		(206) <u>799</u> -4389
Address of Principal Business Operations	(Number and Street, City State, Zij	
(if different from Executive Offices)	PROCESS	RECEIVED
Brief Description of Business		
Investment Fund	DEC 1 3 200	7 << DEC 10 2007 >>
	THOMSON	Bia
Type of Business Organization		160
	□ limited partnership, already form	
□ business trust	☐ limited partnership, to be formed	
A short on Estimated Data of Leasure costion of		ear
Actual or Estimated Date of Incorporation of	<u> </u>	7 Ø Actual Estimated
Jurisdiction of Incorporation or Organizatio	 n: (Enter two-letter U.S. Postal S CN for Canada; FN for other f 	1 13 1 12: 1
GENERAL INSTRUCTIONS	Civilor Canada, 114 for other 1	oreign jurisurectori)
Federal:		
	rities in reliance on an exemption under Regu	ulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When to File: A notice must be filed no later than Exchange Commission (SEC) on the earlier of the dat due, on the date it was mailed by United States register	e it is received by the SEC at the address giv	ne offering. A notice is deemed filed with the U.S. Securities and wen below or, if received at that address after the date on which it is
Where to File: U.S. Securities and Exchange Commis-		C. 20549
	st be filed with the SEC, one of which mu	st be manually signed. Any copies not manually signed must be
Information Required: A new filing must contain all in information requested in Part C, and any material charthe SEC.	formation requested. Amendments need only nges from the information previously supplie	report the name of the issuer and offering, any changes thereto, the d in Parts A and B. Part E and the Appendix need not be filed with
Filing Fee: There is no federal filing fee.		
State:		·
adopted ULOE and that have adopted this form. where sales are to be, or have been made. If a sta	Issuers relying on ULOE must file a sepate requires the payment of a fee as a preshall be filed in the appropriate states in pleted.	on (ULOE) for sales of securities in those states that have parate notice with the Securities Administrator in each state econdition to the claim for the exemption, a fee in the proper accordance with state law. The Appendix to the notice
	ATTENTION	
1		e federal exemption. Conversely, failure to file the

filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	⊠	General and/or Managing Partner							
Full Name (Last name first, if individual)													
Baseline 2008 Seed Associates, LLC													
Business or Residence Address (Number and Street, City, State, Zip Code)													
1557 Francisco St. San Francisco, CA 94123													
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		□ Director		General and/or Managing Partner							
Full Name (Last name first, if individual)													
Steven P. Anderson		•											
Business or Residence Addr	ess (Number and	l Street, City, State, Zip	Code)										
1557 Francisco St. San	Francisco, CA	94123											
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner							
Full Name (Last name first,	if individual)												
Horsley Bridge VIII, I	P.												
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)										
505 Montgomery Street	, 21st Fl. San Fr	ancisco, CA 94111											
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner							
Full Name (Last name first,	if individual)												
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director		General and/or Managing Partner							
Full Name (Last name first,	if individual)												
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)										
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner							
Full Name (Last name first,	if individual)												
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner							
Full Name (Last name first,	if individual)												
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)		-								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Yes No Secondary Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? Yes Secondary Yes No						B. IN	FORMAT	TION ABO	OUT OFFE	ERING				
2. What is the minimum investment that will be accepted from any individual?. 3. Does the offering permit joint ownership of a single unit?	1.	Has th	ne issuer so	old, or doe	s the issuer	intend to	sell, to no	n-accredite	d investors	in this off	fering?	Yes		√o ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation or purchasers in connection with alse of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, flist the name of the broker or dealer. If more than five (5) persons to be listed are associated persons or such as broker or dealer, you may set forth the information for hath broker or dealer. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check**All States** or check individual states)		Answer also in Appendix, Column 2, if filing under ULOE.												
4. Enter the information requested for each person who has been or will be paid or given , directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer run. If more than five (5) persons to be listed are associated persons of sale or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer or dealer run. Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states). (Check "All States" or check individu	2.	What	is the min	imum inve	stment that	t will be ac	cepted fro	om any ind	ividual?		, 	\$	\$25,0	00
State Stat	3.	Does	the offerin	g permit j	oint owners	ship of a si	ngle unit?					Yes		√o □
Business or Residence Address Number and Street, City, State, Zip Code	4.	simila an ass or dea	r remunera ociated pe aler. If m	ation for so rson or ago ore than f	olicitation o ent of a bro ive (5) per	of purchase ker or dea sons to be	ers in con ler registe	nection wit red with th	h sales of s e SEC and	securities i	n the offeri	ing. If a pees, list the	erson to be name of th	listed is e broker
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)	Ful	Name	(Last nam	ne first, if i	individual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States") or check individual states	Bus	iness o	or Residen	ce Address	(Number	and Street,	City, Sta	te, Zip Cod	e)					
Check "All States" or check individual states)	Nar	ne of A	Associated	Broker or	Dealer									
AR	Stat												-	
IL	_	•				•								
MT NE NV NI		_	_	_			_					_		
RI		_					_ -		_	_	_			
Business or Residence Address (Number and Street, City, State, Zip Code)		_	_	_	_	_	_	_	_	_	_	_	_	_
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers C(Check "All States" or check individual states) AR CA CO CT DE DC FL GA HI ID ID IL IN IA KS KY LA ME MD MA MI MN MS MO PA ID PR ID ID ID ID ID ID ID I							01 🗆	VI L	VA L	VVA 🗆	₩ □	VVI 🗆	VV 1	
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)	rui	i Naiiic	(Lasi ilali	iie iiist, ii	iliuiviuuai)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)	Bus	iness o	or Residen	ce Address	(Number	and Street,	City, Sta	te, Zip Cod	e)					
All States All States Or check individual states	Nar	ne of A	Associated	Broker or	Dealer						,			
AL	Stat													
IL						-							🖸 A	ll States
MT							со	CT 🗆	· DE 🗀	DC 🗆	FL 🛚	GA □	н 🗆	
RI	Ji	L	IN 🗆							MA 🗆				MO 🗆
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)		_	_	_	_					_	-			
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)							UT 🗆	VT D		WA 🗆	w o	WI 🗆		PR 🗀
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)	1 41	i ivaliic	, (Last Hall	ac mst, m	ilidividuai)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual states)	Bus	iness o	or Residen	ce Address	(Number	and Street,	City, Sta	te, Zip Cod	e)					
(Check "All States" or check individual states).	Nar	ne of A	Associated	Broker or	Dealer									
AL	Stat													
IL IN IN IN A IN KS IN KY IN LA IN ME IN MD IN MA IN MIN IN MS IN MO IN MT IN NE IN NV IN NV IN NV IN NV IN NV IN ON IN ON IN OR IN PA IN		•				•								
MT NE NV NH NJ NM NY NC ND OH OK OR PA													_	
				_					_	_	_	-	_	
KILL SCLI SDLI IN LI IX LI DILI VILI VALI VALI VVILI VILI VILI PRII			SC 🗆	SD 🗆	TN 🗆	ם אד	UT 🗆	VT 🗆	VA 🗆	WA 🗆	w 🗆	WI 🗆	WY 🗆	PR 🗆

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\precedef \) and indicate in the columns below the amounts of the securities for exchange and already exchanged. Aggregate **Amount Already** Offering Price Sold Type of Security Debt Equity..... □ Common □ Preferred Convertible Securities (including warrants) 13,000,000 8,375,000 Partnership Interests..... \$ Other (Specify Total 13,000,000 8,375,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Aggregate Number **Dollar Amount** Investors of Purchases 14 \$ 8,375,000 Accredited Investors \$ Non-accredited Investors 8,375,000 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Security Type of offering Sold Rule 505 Regulation A \$ Rule 504 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the

issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 5,000 Ø Printing and Engraving Costs..... 70,000 Legal Fees 10,000 Accounting Fees. \boxtimes \$ Engineering Fees Sales Commissions (specify finders' fees separately)..... \$ 2,000 Miscellaneous expenses X Other Expenses (identify) 87,000 \boxtimes Total

	C. OFFERING PRICE, NU	MBER OF INVESTORS	S, EXPEN	SES A	AND USE OF I	PROCE	EDS	
and tota	ster the difference between the aggregate offer all expenses furnished in response to Part C – s to the issuer."	Question 4.a. This difference	is the "adjust	ed gros	s		\$	12,913,000
used fo	e below the amount of the adjusted gros or each of the purposes shown. If the am the and check the box to the left of the es the adjusted gross proceeds to the issuer	nount for any purpose is not stimate. The total of the pa	t known, fur syments list	rnish a ed mus	n st		·	
					Payments to Officers, Directors & Affiliates			Payments to Others
Salarie	s and fees			\$			\$	
Purcha	se of real estate			\$	•		\$	
Purcha	se, rental or leasing and installment of m	achinery		,				· · · · · · · · · · · · · · · · · · ·
and eq	uipment	***************************************		\$.		□	\$	
Constr	uction or leasing of plant buildings and fa	acilities		\$.		_ □	\$	
this of	ition of other businesses (including the fering that may be used in exchange r issuer pursuant to a merger)	for the assets or securities	s of	\$			\$	
Repayı	nent of indebtedness			\$			\$	
Workii	ng capital			\$			\$	
				\$		 🛛	\$	12,913,000
				\$			\$	
Colum	n Totals			\$	0.00	🛛	\$	12,913,000
Total F	ayments Listed (column totals added)				⊠ \$.	12,91	3,000
-	<u> </u>	D. FEDERAL SIG	SNATURI	 E				
he follow	has duly caused this notice to be sig ing signature constitutes an undertal quest of its staff, the information fu	king by the issuer to fur	nish to the	U.S.	Securities and	Exchan	ge Co	mmission, upon
ssuer (Pri	nt or Type)	Signature			1	Date		- 11 - 11 - 12 - 12 - 12 - 12 - 12 - 12
Baseli	ne 2008 Seed Fund, LLC	X/ /~		_	1	Novemb	er 26,	2007
Name of S	igner (Print or Type)	Title of Signer (Print	t or Type)					
Steve	n P. Anderson	Managing Director of I	Baseline 20	08 See	d Associates, LLC	C, the Ma	ınaginı	g Member of the
						•		
		ATTENT	ION		., .,			
	Intentional misstatements or omiss			iminal	violations. (S	ee 18 U	.s.c.	1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		

- The undersigned hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Baseline 2008 Seed Fund, LLC	X/\	November 26, 2007
Name (Print or Type)	Title of Signer (Print or Type)	•
Steven P. Anderson	Managing Director of Baseline 2008 Seed A	Associates, LLC, the Managing Member of the

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	7	2	3	3 4					
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	•	amount pur	investor and chased in State C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL								0	
AK									0
AZ									
AR									
CA	0	⊠	\$13,000,000	7	\$6,700,000	0	\$0.00	ū	Ø
СО									
СТ	<u> </u>	⊠	\$13,000,000	1	\$200,000	0	\$0.00		Ø
DE								а	
DC									
FL	ם	⊠	\$13,000,000	1	\$125,000	0	\$0.00		Ø
GA									
Hl									
ID									D.
IL									
IN	Ω			•					
IA									
KS		0							
KY									0
LA		0						٥	
ME	D	<u> </u>							
MD								۵	
MA		⊠	\$13,000,000	2	\$525,000	0	\$0.00		⊠
MI								ם	
MN									
MS									

APPENDIX

1	:	2	3		4					
	Intend to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	• . •					fication State OE attach ition of granted) Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		D						0		
MT									ū	
NE								ם	. 🗆	
NV	D		*						۵	
NH	0							٥		
NJ	0								В	
NM		٥						ū		
NY		⊠	\$13,000,000	2	\$325,000	0	\$0.00		Ø	
NC										
ND	0								۵	
ОН	0			i				۵		
ОК	D									
OR										
PA	a	o.			·					
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SC	0									
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TN	0									
TX									D.	
UT										
VT		0								
VA								0	Ö	
WA	0								0	
WV							·			
WI	a									

	APPENDIX													
1	2	2	3			4		5						
	to non-ac	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			amount purchased in State							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR		۵							0					

^{*} Amount purchased by Foreign Investors: \$500,000

